NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES	Docket Number (Optional) 284502000600

In re Application of
Halle MORTON et al.

Application Number 09/889,867	Filed (Int'l) January 20, 2000

For   COMBINATION CHAPERONIN 10 AND BETA-INTERFERON THERAPY FOR MULTIPLE SCLEROSIS (AMENDED)

Art Unit 1647	Examiner J. Seharaseyon

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) $ 500.00

[x] Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: $ 250.00

[ ] A check in the amount of the fee is enclosed.

[ ] Payment by credit card. Form PTO-2038 is attached.

[ ] The Director has already been authorized to charge fees in this application to a Deposit Account.
I have enclosed a duplicate copy of this sheet.

[x] The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No.   03-1952   ~~I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.~~

[x] A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

I am the

[ ] applicant /inventor.

[ ] assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.   (Form PTO/SB/96)

[x] attorney or agent of record.

Registration number   38,440

[ ] attorney or agent acting under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34.   _____

/Gregory P. Einhorn/
Signature

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Typed or printed name

(858) 720-5133
Telephone number

June 11, 2007
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

[x] *Total of   1   forms are submitted.

sd-378910